

# Town of Hardenburgh Ulster County N.Y.12406

Supervisor Jerry Fairbairn (845) 586-3135 Town Clerk Wendy Buerge (845) 586-3135 FAX (845) 586-3135

C.E.O./Z.E.O Karl von Hassel (845) 254-4340 Fax (845)254-6005

#### **BUILDING PERMIT INSTRUCTIONS**

Attached is the building permit application you requested. The owner or its agent of the property must sign all applications. We suggest that the owner read these instructions being completed.

- **1.)** Building permit posting notice MUST be displayed on building site and a copy of the required inspections is to be available for initialing by the inspector. We suggest that the Building Permit be placed in a plastic envelop before posting.
- **2.**) When an inspection is required, notify the Code Enforcement Officer. We must have 72 hours' notice phone (845) 254-4340
- 3.) If construction is started prior to obtaining a building permit, all fees will be doubled.

# NO BUILDING PERMIT WILL BE ISSUED UNTIL ALL REQUIREMENTS LISTED BELOW HAVE BEEN FILLED.

- 4.) Items to be submitted with Application.
  - a. Complete permit application with good direction to the job site 911# or other direction.
  - b. Appropriate fee. (Check made out to the Town of Hardenburgh)
- c. A Certificate of Insurance for Workman's Compensation and Disability must be attached to application Form # CE-200 or DB-120.1 or DB-155. *The old ACORD forms are not acceptable.*

How to obtain the new forms: online <u>www.wcb.state.ny.us</u> or any Workers Compensation Board district Office Albany 518 486-3349. And the forms shall be attached to the building permit application.

- d. Septic approval if needed. e. Truss Form f. A plot plan. q. Flood zone permit if needed.
- **5.) For Alterations, Site Build Dwellings, Accessory Building and For Commercial** (Including Shells) Two (2) copies of plans and specifications including Floor plan. A separate insulation schedule will be required REScheck 4.7.1 and Commercial COMcheck 4.1.4 and all other information required to demonstrate compliance with the NYSBC 2020.

All plans and specifications shall be in accordance with the State Education Law, Section 7307 and 7209. This law requires that the seal and signature of a licensed architect or professional engineer be affixed to all plans submitted except alterations costing under \$10,000. The authority conferred by such permit may be limited by conditions. As per NYS Industrial Code Rule 56, an asbestos survey is required for all renovation, remodeling, repair and demolition of all interior and exterior building materials. Which were constructed prior to 1974, are subject to surveys/inspection for asbestos, prior to commencement of construction or demolition work. Shall be submitted to the Code Enforcement Officer, one copy will be marked accepted and returned. A permit will be issued when the application has been determined to be complete and when the proposed work is determined to conform to the specification and requirements of the Uniform Building Code. All plans shall be in accordance with the State Education Law.

# 6.) Required Documentation for Permits: Factory Manufactured Housing Single wide or Double wide.

1.) Please attach up to date Manufacture's Installation Manual. 2.) Manufacture serial #, Model # and home build date 3.) Installer Certification # and Seller Certification # 4.) Foundations or Slap design by a NY State registered Engineer professional must be approved by the home's manufacturer

# FOR MANUFATURED HOME OR MODULAR HOME YOU MUST NOTIFY THE CODE ENFOCEMENT OFFICIAL and HIGHWAY SUPERINTENDENT 48 HOURS BEFORE DELIVERY

The applicant shall notify the Code Enforcement Officer of any changes in the information contained in the application during the period for which the permit is in effect.

A building permit shall expire, one year from the date of issuance or upon the issuance of a Certificate of Occupancy (other than a temporary Certificate of Occupancy), whichever comes first. The permit may, upon written request, be renewed for successive one year periods provided that (1) the permit has not been revoked or suspended at the time the application for renewal is made, (2) the relevant information on the application is up-to-date; and (3) the renewal fee is paid.

A building permit may be suspended or revoked if it is determined that the work to which it pertains is not proceeding in conformance with the Uniform Code or with any condition attached to such permit, or if there has been a misrepresentation or falsification of a material fact in connection with the application for the permit.

Before a C/O or C/C can be Issued for a Modular Homes and stick build Homes a Documentation of the ACH 50 test result is needed.

Before occupying any building a Certificate of Compliance or Certificate of Occupancy has to be obtained.

Listings of Proposed Work, A. Nature of Proposed Work

New Building
Addition
Alteration Exterior or Interior
Storage Shed
Change of use
Relocation of Structures

Double Wide Modular Home Garages, Carport Swimming Pool Demolition

New Oil / Gas Burner, Wood Stove, Fireplace or Generac Generator

**B.** Construction Class

**Type I - Fire Resistive** 

**Type II - Noncombustible** 

Type II - Noncombustible

Type III - Ordinary

Type IV - Heavy Timber

Type V – Frame

C. Occupancy or Use Classification

**Group A-1 Theaters** 

**Group A-2 Bars** 

**Group A-3 Community Hall** 

**Group A-4 Arenas** 

**Group A-5 Stadiums** 

Group B Banks

Group E Day Care

Group F1 – F2 Factory

Group H high hazard

Group R-1 Multiple-Dwelling Hotel/Motel

Group R-2 Multiple-Dwelling Apartments

Group R-3 One-Family and Two-Families

Group R-4 Multiple-Dwelling Senior Citizen

Group F-1 thru F-2 Industrial Group H-1 thru H-4 High Hazard

Group I-1 thru I-4 Group S-1 thru S-2 Storage Group U Miscellaneous

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### Town of Hardenburgh BUILDING PERMIT APPLICATION FORM

FOR OFFICIAL US	E ONLY				
Date Received:	Dat	te Issued:	Building Per	mit #	
Reason for Refusal:	Article:		Section:	Part:	Fee \$
Culvert: Yes No	Size	Quantity:	Bldg. Style:	Structure (	Code:
Date		Tax	Map #		
1.) Permit Applicant	::			Phone:	
Address:			E-Mail		
2.) Name & Addres	s of Owner	(if different fr	om applicant :)	Phone:	
3.) Location of Prop	erty:				
Street:				91	1 #
4.) Architect or Eng	ineer of Re	ecord:			
Name:				Phone #	
5.) Contractor:					

Name: Addre	SS:
Phone #	
Town of Hardenburgh Building Peri	mit Application Form[cont.]
Insurance: Workman Comp. Secured by Contractor Yes( Disability Benefits Secured by Contractor Yes( Certificate of Insurance Attached: Yes( 6.) Estimated Cost [Including labor] \$Lot Size: Acre	o No ( ) N/A ( ) esMax. Height
Proposed use and or Existing use:	
7.) Proposed Work, Construction and Occupancy Classification	see attachment on page 2]
A. Nature of Work	
Construction Classification Occupancy or use Classif	ication
Building size No of Bedrooms Square footage 1	st floor 2 <sup>nd</sup> floor
Basement sizeType of footing	Type of Foundation
8.) Site Information	
A. Fire Limits: Is site within established Fire Limits	
B. Flood plain: Is the site within a flood plain	
C. Water Supply:	
D. Sewage Disposal System	
10.) Setbacks Front 25 feet side 25 feet rear 50 feet	
11.) Setbacks Front feet side feet rearfe	et
12.) Double / single wide Home only: Manufacturer's Specificat	
13.) Serial #	
14.) HUD #	Year

The undersigned hereby makes application for a **Building Permit** pursuant to those provisions of the Code of the Town of Hardenburgh, Ulster County, the State of New York, and agrees to comply with said ordinance and all other laws, regulations, and requirements of the Town of Hardenburgh and the State of New York, and agrees to permit the Town of Hardenburgh Code Enforcement Officer or his agent to enter upon the premises without a warrant, for the purpose of inspection.

# 10.) FOR ANY MANUFACTURED HOME OR MODULAR HOME YOU MUST NOTIFY HIGHWAY SUPERINTENDENT 48 HOURS BEFORE DELIVERY

# Must apply for a Certificate of Compliance or Certificate Occupancy upon completion

Signature of Applicant.	Date



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# NOTICE OF UTILIZATION OF TRUSS TYPE CONSTRUCTION, PRE-ENGINEERED WOOD CONSTRUCTION AND/OR TIMBER CONSTRUCTION IN RESIDENTIAL STRUCTURES

(In accordance with Title 19 NYCRR PART 1265)

Owner Name:	
Physical Address:	
Tax Map #:	Phone #:
PLEASE TAKE NOTI	CE THAT (check each applicable line):
☐ New Residential Struc	ture Addition to Existing Residential Structure
☐ Rehabilitation to Exist	ing Residential Structure
	ED OR PERFORMED AT THE SUBJECT PROPERTY REFERENCE ABOVE k each applicable line):
Truss Type Construction	on (TT) Pre-Engineered Wood Construction (PW) Timber Construction (TC)
IN THE FOLLOWING	G LOCATION(S) (check each applicable line):
Floor Framing, Including	ng Girders and Beams (F) Roof Framing (R) Floor Framing and Roof Framing (FR)
Sign/symbol will be placed	d ( ) on or near outdoor electric meter box ( ) other location (specify)

I certify that the statements herein are true to the best of my knowledge and belief.				
SIGNATURE:			DATE:	
PRINT NAME:				
CAPACITY (Check One):	Owner		Owner's Representative	

# **PLOT PLAN**

Show location of proposed building and distances to all property lines. Portion of building facing the road shall be the front.

### **APPLICATION FOR SITE PLAN REVIEW**

## **Town of Hardenburgh**

Owner:	Plans drawn by:	
Address:		
Phone #:		
New building Yes [] No [] Exterior a	addition Yes [] No []	Site change Yes [] No []
Proposed use of site:		
Site location:		
Setbacks Front feet side feet rear	feet	
Tax map description:		
Map # Block	Lot	Acreage
Permits needed:		
Federal Yes[]No[] State Yes[] No[] County Yes[]N	o[] Local Yes[]No[] DEP.	Yes[]No[] Flood plain Develop. Yes[]No[]
Anticipated construction time:		
Will construction/development be staged Yes [] N	o []	
Anticipated increase in bedrooms:		
Anticipated future improvements:		

Is site compatible with neighboring uses?\_\_\_\_\_

Date submitted to Zoning Board:		
Statement of Compliance		
I agree to comply with the regulation and changes to my property.	stated in the Town of Hardenbu	irg Zoning Law in all future addition, improvements
Applicant		Date
	Town of Ha	ardenburgh N.Y.12406
Supervisor Jerry Fairbairn (845) 586-3135	Town Clerk Wendy Buerge (845) 586-3135 FAX (845) 586-3135	(845) 254-4340
	Information of S	eptic System
No Building Permit will be Issued until	this completed form is submitted	ed to the Code Enforcement Officer
		dopted new regulation concerning septic System. Two system can be installed. In some cases an alternative
from the Bureau of Water Supply, rega	ardless of the fact that a buildin contact the NYCDEP - Engineeri	by until it has received an acceptable septic reporting permit was issued.  Ing Section P. O. Box 370 Shokan NY 12481 or
Name & Address of Owner:		
Tax Map #	Signature of	Owner:

Sworn to me before:

<u>This</u>	day of	20	
	Notary Public		
		Town of Ha	ardenburgh N.Y.12406
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		Consent to inspect Pr	emises
	The applicant hereby conser	nts to the Code Enforcement	Officer, or his duly authorized Agent
	To enter the premi	ses for any reasons conne	cted with the building permit
	Signature of Owner		Date
Swori	n to me before:		
This_	day of		

Notary Public

# Must apply for a Certificate of Compliance or

## Certificate Occupancy upon completion Town of Hardenburgh

**Contact Persons** 

Town Clerk.

Supervisor.

**Wendy Buerge** 51 Rider Hollow Rd Arkville NY 12406 (845) 586-3135 FAX(845) 586-3135 Jerry Fairbairn 51 Rider Hollow Rd Arkville NY 12406 (845) 586 3135

Fees to be sent with application to Code Enforcement Officer

CEO/ZEO/Flood Plain Manager

Karl Von Hassel 524 County Hwy 3 Halcott Center.N.Y.12430 (845)254-4340

Fax: (845)254-6005 Cell (845) 332-3223 E-Mail hund65@gmail.com ZBA appeal Debra Storm Todd Mtn. Rd Arkville NY 12406 845-586-2610

Planning Board.

William Scholl Dry Brook Rd Arkville NY 12406 845-586-4056 **Town Board** 

Electrical Inspectors.

Malcolm Fairlie [845] 254-4290

Common Wealth Inspection (845) 586-2430

Fax (845) 586-1629

John Hamilton 845 549 0708 or (845) 496-4443

Tri County Todd Klikus 570-729-7643

Chris Peone 845 853-3202 E-Mail cpeonesystems@gmail.com Frank Schmaus 845-733-4926

Cell 845-800-6909 E-Mail sqsfxs@hotmail.com

Z3 Consultants, Inc. PO Box 363, Lagrangeville, NY 12540

accounting@z3consultants.com

Phone: 845-471-9370, 845-345-9843 Fax: 845-625-1479

Vinny Ambrosio & Al Shauger

Office - 845-544-2180 Fax- 845-544-7257

**Blower Door Contact** 

John Moore 845 256-0019

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